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ABSTRACT

This article describes the development, implementation, and evaluation of a 1-week inservice program for graduate students teaching a course entitled "Personal Health" at the University of Oregon. The survey course covers issues relevant to the college-age population, and its purpose is to provide students with the knowledge and skills needed to make healthy lifestyle decisions. The inservice training for the graduate students who teach the course focuses on a good knowledge of the course content and good teaching methods. (JD)

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TEACHING PERSONAL HEALTH: AN INSERVICE MODEL FOR GRADUATE TEACHING ASSISTANTS

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ABSTRACT

This article describes the development, implementation and evaluation of a one week in-service program for graduate students teaching Personal Health at the University of Oregon. The idea for the in-service came from graduate students and was developed by faculty for presentation in Fall, 1986. Evaluations indicate the in-service program was well received by new GTFs and effective in improving instruction. Other institutions that use graduate students to teach Personal Health type courses are urged to develop their own in-service program.

Most colleges and universities offer some type of personal health course.[1] At the University of Oregon, Personal Health (HES 250) is a general university degree requirement for all undergraduates. This three quarter hour survey course covers issues relevant to the college-age population including such topics as nutrition, fitness, stress management, disease, human sexuality, environmental health, mental health, community health, consumer health, drugs, aging, and death and dying. The purpose of the course is to provide students with the knowledge and skills needed to make healthy lifestyle decisions. Since the course is a requirement, students often enter the classroom with feelings of resentment for being forced to take the class. Instructors teaching the course, therefore, must have a good knowledge of health and good teaching methods to overcome these initial obstacles.

Instruction for HES 250 is primarily provided by graduate teaching fellows (GTFs). These GTFs usually teach two sections of HES 250 per term in addition to being full time graduate students at either the masters or doctoral level. It is often difficult for GTFs to meet the rigorous demands of graduate work and to spend the time and energy necessary to be an excellent classroom teacher. This is especially noticeable during Fall term each year as a new group of GTFs enter the program.

In the past new GTFs were required to report to campus one week prior to the beginning of fall term classes. During this one

week they were expected to attend an orientation meeting with the health education faculty, attend an orientation meeting with university personnel, meet with their academic advisor to plan a program of study, complete the registration process, work at registration for four hours, and get settled into their office space. In addition new GTFs were to do all the organization and planning necessary to teach their own personal health class that would be starting the following week. This involved developing a syllabus, identifying and contacting speakers, previewing and ordering films, reviewing a textbook, and, hopefully, getting at least the first few lessons ready to teach. To make the situation worse, most new GTFs were from out-of-town and, therefore, not familiar with the university or its workings. They had no idea of speaker availability or where to go to reserve films. Needless to say, this was a very demanding week and new GTFs started their first term feeling stressed and already behind in their work.

During Spring term, 1986, the Health Education Faculty, at the request of the GTFs, decided to develop a week long orientation program for incoming GTFs who would be teaching HES 250 during Fall term 1986. The authors were given the responsibility to develop and implement this program. The following in-service program description is presented for use by readers who can identify with the scenario described above and are interested in developing their own GTF in-service program.

INSERVICE DEVELOPMENT AND AGENDA

A Personal Health In-service Committee, composed of faculty and returning GTFs, was established in the spring of 1986 to plan and implement a GTF in-service for the following Fall term. The end product of the committee's work was a five-day in-service including tours, orientation to the University of Oregon student services, teaching methods, evaluation procedures, survey of local resources and, of course, socials. During the last in-service session of the week GTFs were given an in-service evaluation form to complete and return. When appropriate, comments and suggestions from GTFs will be incorporated into the discussion as the program is described below.

INSERVICE PORTFOLIO AND AGENDA

All GTFs were required to report to campus one full week earlier than previous years to take part in the in-service program. At the first in-service session, each GTF received a portfolio which included the following information: agenda, personnel names/addresses, faculty biographies, sample HES 250 syllabi, university and community resource list, order forms for films and books, information on grading procedures, clerical services information and maps of the university and community. Materials contained in the portfolios were not only utilized during the in-

service, but throughout the entire school year. GTFs felt the resource lists, maps and forms were of particular value. They also stated additional syllabi examples would have been beneficial.

The agenda for the in-service consisted of five general areas: socials, campus tours, departmental policies and procedures, content area presentations by faculty, and campus student services. Figure 1 shows the time frame and organization of in-service topics and activities.

(INSERT FIGURE 1)

Social Events -- The breakfast, group lunch, picnic and Spencer Butte hike provided opportunities for GTFs to become familiar with each other and with faculty. Interactive icebreakers were planned during the initial breakfast, and opening remarks were given by the dean and department head. Formal presentations and activities were not planned for the lunches or picnic so that more informal socializing could take place. GTF and faculty families were also invited to the picnic to get acquainted with each other. The planning committee was careful to choose wholesome foods for all events.

Campus Tours -- Four tours were planned based on the potential for utilization of services in planning HEP 250 courses. The university library, instructional media center, P.E. facilities (specifically hydrostatic weighing), and student health center all offer services previously used by GTFs in Personal Health classes. Tours were conducted by personnel from the respective service areas and

generally lasted about an hour. Each GTF was given the opportunity to be underwater weighed. Since GTFs promote the concept of body fat vs. pounds in their classes and often encourage students to be underwater weighed, it was felt the GTFs should undergo the experience themselves.

Departmental Policies and Office Space -- The clerical staff oriented GTFs on office protocol and work orders. This session was deemed important to contribute to the efficiency of departmental operations. GTFs gained an appreciation of the difficulty clerical personnel have in serving nine full-time faculty, 18 GTFs and numerous adjunct faculty. Late in the afternoon of the first day GTFs were allotted time to move into their office spaces while having faculty available to act as trouble shooters for logistical problems.

As part of departmental policies, academic freedom was discussed in relation to course expectations and grading procedures. GTFs were then given a review on principles of test construction and evaluation methods.

Content Area Presentations -- Since personal health is a survey course, little time can be spent on any one topic. It is often difficult for GTFs that have not previously taught such a course to decide what is most important to cover. For this reason, faculty members with specific content expertise were asked to present 15 minute sessions on their speciality areas. In these short sessions faculty were to identify some of the most salient issues for the college age population, present possible learning activities for classroom use, and

provide a list of available resources. In addition to providing the GTFs with information on each topic area, these sessions also served to familiarize GTFs with each faculty members specific area of interest. Evaluations indicated that the time allotted for these sessions was too short. Suggestions were also made that presentations from returning GTFs that had recently taught Personal Health might be helpful.

Campus Student Services -- Since foreign students comprise nine percent of the total student body (1550 students), time was allotted to discuss health issues of concern to this special population. This session was conducted by the Office of International Students. In addition to health issues, concerns related to teaching students in their second language were discussed.

The second student service presentation was by the campus IMPACT Committee. This committee is trained to educate about and intervene in drug related problems on campus. IMPACT members make themselves available to speak in Personal Health classes. In addition, they provide intervention assistance for students when requested.

SUMMARY

Upon review of GTF in-service evaluations the planning committee concluded that this event was highly successful and should be

replicated in future years. On a ten point scale, with 10 being high, the mean score for the workshop was 7.86. By far the most common suggestion for program improvement centered on the formal inclusion of returning GTF input earlier in the week and for the duration of the in-service. Participants felt returning GTFs were an invaluable resource for problem-solving and strategies for use in teaching Personal Health. Overall the time frame and agenda received high ratings with criticisms limited to individual speakers who were not adequately prepared.

When comparing the in-serviced GTFs with those GTFs from the previous five years who did not receive formal in-service training, the in-serviced GTFs received higher Fall term student evaluation scores for both "instructor" and "course" (See Table 1). Using ANOVA it was determined the differences between scores were statistically significant. Since intervening variables such as academic background and previous teaching experience were uncontrolled, definitive statements regarding the effects of in-servicing GTFs on teacher effectiveness can not be made. It is the authors opinion, however, that these scores do provide incentive to continue the GTF in-service program and do further study.

In addition to the above advantages, the transition time in the lives of our GTFs was more manageable and social support was provided from the first day they arrived on campus. Although still difficult, the first few weeks of graduate school were definitely less stressful. The authors strongly urge colleagues not currently providing in-service for their GTFs to consider the advantages of such a program.

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TABLE 1

MEAN INSTRUCTOR AND COURSE STUDENT EVALUATION SCORES*
1982-1986

YEAR	INSTRUCTOR	COURSE
1982	8.107	8.207
1983	7.862	7.907
1984	8.054	8.138
1985	7.456	7.438
1986**	8.293	8.420
	p=.011	p<.01

*Scores range from 1 to 10
**GTF in-service provided